



The Bermuda Junior Service League
PO Box HM 1226 Hamilton HMF
www.bjsl.bm
bjsl@northrock.bm

Teen League Application

Name
Street Address
Postal Address
Home Phone
Cell Phone
Email
Date of Birth
Parent/Guardian Name
Parent/ Guardian Phone

Name of School
Hobbies and Interests
Shirt Size
<i>I confirm that I am currently enrolled in full time education</i>
Date:
Applicant Signature
Parent/ Guardian Signature